PHA 5-Year and	U.S. Department of Housing and Urban	OMB No. 2577-0226
11174 5-1 car and	Development	Expires 4/30/2011
Annual Plan	Office of Public and Indian Housing	

1.0	PHA Information PHA Name: Somerville Housing Authority PHA Type: ☐ Small ☑ High PHA Fiscal Year Beginning: (MM/YYYY):	Performing	☐ Standard	PH. HCV (Section 8)	A Code <u>: MA0</u>	<u>31</u>
2.0	Inventory (based on ACC units at time of F Number of PH units: <u>584</u>	Y beginning	in 1.0 above) Numb	er of HCV units: 1193		
3.0	Submission Type 5-Year and Annual Plan	Annual	Plan Only	5-Year Plan Only		
4.0	PHA Consortia	HA Consort	ia: (Check box if submitting a joi	nt Plan and complete table b	elow.)	
	Participating PHAs	PHA	Program(s) Included in the	Programs Not in the	No. of U Program	nits in Each
	Participating FTIAS	Code	Consortia	Consortia	PH	HCV
	PHA 1:					
	PHA 2:					
5.0	PHA 3: 5-Year Plan. Complete items 5.1 and 5.2 or					
5.1	Mission. State the PHA's Mission for servi jurisdiction for the next five years: N/A Submitted Only with 5-Year Plan					
5.2	Goals and Objectives. Identify the PHA's low-income, and extremely low-income fan and objectives described in the previous 5-7 N/A Submitted Only with 5-Year Plan	nilies for the	goals and objectives that will en- next five years. Include a report	able the PHA to serve the ne on the progress the PHA ha	eds of low-inc s made in meet	ome and very ting the goals

PHA Plan Update

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: Implementation Integrated Pest Management Policy.

(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. Somerville Housing Authority Main Office at 30 Memorial Road, Somerville MA

On-Site AMP 1 Manager Office at 5 Canal Lane, Somerville MA and site office AMP 2 at 278 Powderhouse Blvd. Somerville MA 6.1 Eligibility, Selection and Admission Policies, including waiting List Procedures, and Rent Determination Policy including the Methodology for selecting flat rents, and schedule of flat rents.

Flat rents are defined in the Somerville Housing Authority ACOP available at the Somerville Housing Authority Administration Office and in the Tenant Selection Office. Flat rents take into consideration the market rents, other area housing payment standards, and the FMR's, Flat Rents calculations were completed in September 2011 will be increased largely due to increased demand on local rental market. Flat rents are approved by the Board of Commissioners.

The SHA is part of the Centralized Waiting list. A single standardized Preliminary application is available at the SHA, or at the office of any Housing Authority participating in the centralized waiting list option. When received, the application is date and time stamped. The SHA enters the information from the preliminary application into the Centralized Waiting List. Applicants nearing the top of the waiting list will attend an eligibility interview. At this time applicants will be required to complete a full application which will be utilized to make a final determination of eligibility. The SHA will ensure that verification of all preferences and eligibility selection factors are current. Applicants will be required to provide verification of: preference/priority; family composition; income; allowances and deductions. After the verification process is completed the SHA will make a final determination of eligibility. If the family is determined eligible, the SHA will mail a notification of eligibility. When vouchers are available, a briefing will be scheduled for the issuance.

Site Based Lists: The SHA currently has (147) PBV projects and maintains separate waiting lists for individual projects or buildings (or for sets of units). The SHA places families referred by the PBV owner on its SHA-maintained PBV site specific waiting lists. Families could also apply directly with the SHA for site specific waiting lists. The Centralized Waiting List application also advises families of their right to be listed for both the tenant based and site specific PBV waiting lists. Applicants are determined eligible according to the SHA Admin Plan.

6.2 Financial Resources (FY 2011)

The Somerville Housing Authority Financial Resources are included in this plan Attachment A.

6.3 Rent Determination

Rent Determination is defined in the Somerville Housing Authority ACOP and Section 8 Administrative Plan available at the Somerville Housing Authority Administrative Offices at 30 Memorial Road, Somerville. Rent Determination for both Federal Public Housing and Section 8 are also available through the U.S. Department of Housing and Urban Development.

6.4 Operations and Management

The Somerville Housing Authority Operations and Management Procedures are incorporated into the Somerville Housing Authority Maintenance Management Plan and is available at the Somerville Housing Authority administrative offices at 30 Memorial Road, Somerville.

6.5 Grievance Procedures

PHA established grievance procedures as required by 24CFR Part 966, Subpart B, for residents of public housing The Somerville Housing Authority Grievance Procedures are available at the Somerville Housing Authority Administration Offices at 30 Memorial Road, Somerville.

6.0 6.6 Designated Housing for Elderly and disabled Families

SHA had designated AMP 2, 3 and 4

AMP 2Highland Gardens MA31-2 Elderly/Disabled, Affected Units 42/ Designated 39 Brady MA31-3 Elderly/Disabled, Affected Units 84/ Designated 79 Weston Manor MA31-7 Elderly/Disabled, Affected Units 80/ Designated 76 AMP 3: Ciampa Manor 27 College Ave. AMP 4: Properzi Manor 15 Warren Ave: (3)

6.7 Community Service and Self-sufficiency

The SHA has a Family Self-Sufficiency Program. Any and all eligible participant are encouraged to contact the SHA FSS Coordinator at 617-625-1152. Both the CSS and FSS Action Plan is available at the Administrative Offices at 30 Memorial Road, Somerville.

6.8 Safety and Crime Prevention: A: Safety an Crime Prevention (i) In 2011, the SHA documented over 3021 service calls by SHA staff responding to crime and crime prevention, including: 16 violent assaults; 25 property crimes; 119 complaints of noise and disorder; 17 domestic disputes and 6 criminal substance abuse issues. Somerville Police Department numbers not available.

(ii) SHA staffs 150 hours per week of public safety officers to prevent crime and respond to complaints The SHA monitors video surveillance at all developments SHA staff conducted over 2198 patrols of specific sites to prevent crime and responded to over 823 calls for assistance from residents. The SHA assists agencies and victims in the prevention and investigation of child, senior and domestic abuse. The SHA conducts annual resident training concerning crime and fire prevention. The SHA daily inspects properties for safety and security issues and causes them to be repaired. SHA Public Safety staff assist Housing Managers to enforce lease provisions in cases of residents who commit lease violations. SHA staff assists those facing substance abuse or mental health issues preventing criminal behavior.

(iii) The SHA communicates daily with the Somerville Police Department concerning issues of common concern and coordinated response. The SHA participates in regional criminal justice efforts to prevent crime, specially gang related. The SHA participates in criminal justice system efforts to monitor provide opportunities for those rehabilitation efforts.

6.9 Pets

The SHA Pet Policy is available at the Administrative Offices at 30 Memorial Road, Somerville. The policy prohibits specific animals and sizes and depends on property designation. The policy is reviewed annually with RAB

6.10 Civil Rights Certifications

The SHA certifies that is administers all of its housing programs without regard to race, color, sexual orientation, religion, age, handicap, disability, national origin, ethnicity, familial status or marital status. The SHA AFFH efforts include working with our local jurisdiction and coordinates both plans to be consistent

6.11 Fiscal Year Audit

The latest Fiscal Year Audit resulted in "No Findings"

6.12 Asset Management

The SHA has implemented the Asset Based Management model and restructured our accounting, management and maintenance operations to more effectively quantify and manage costs. SHA performs annual PNA's on entire portfolio for capital investment management. SHA reviews monthly operating expenditures and manages adjustments.

6. 13 Violence Against Women Act

The Somerville Housing Authority is committed to assist victims of domestic violence. Our VAWA policy has helped to guide our relationship with a variety of agencies serving DV victims and families. SHA's Executive division, resident services, tenant selection and management staff have hosted multiple meetings and working sessions to address process issues and improve communications.

7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable. The Somerville Housing Authority has a Section 8 Homeownership program. Due to current market conditions the program has been rendered inactive. The SHA works with local CDC to offer 1 st -Time homebuyer training certified by the Massachusetts Homeownership Collaborative in order to prepare residents for the opportunity when market conditions become conducive. 7.0 (c) SHA administers a PBV Program and is engaged in an overall strategy to increase affordable housing. Somerville is a densely populated city and current market conditions and zoning restrictions create challenges for large scale development. SHA will support affordable housing opportunities where supported by the local jurisdiction. SHA currently administers 142 PBV's at scattered sites PBV utilization will be consistent with our 5-year plan and will not exceed 20% of allocation. At time of this 2012 Plan submission, SHA plans to offer up to 60-PBV's for developments focused on 1-bedroom units for Elderly and Disabled families.
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFFP financing.
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund Program Five-Year Action Plan, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.
8.3	Capital Fund Financing Program (CFFP). Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. N/A Submitted Only with 5-Year Plan
9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. N/A Submitted Only with 5-Year Plan
10.0	Additional Information. Describe the following, as well as any additional information HUD has requested.
	(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
	N/A Submitted Only with 5-Year Plan
11.0	Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office. (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only) (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only) (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only) (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only) (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

Expires 4/30/2011

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

Caparat Type and Number Caparat Type and Number Replacement Housing Factor Grant No: Replacement Housing Factor Grant No: Date of CFFP. Total Estimated Cost Total Schimated Cost Total Cost Total Schimated Cost Total Performance and Evaluation SS 2,900	-	Part I: Summary				CFOC TO CALALLE
Revised Annual Statement (revision no:) IRevised Ending: Total Extimated Cost Total Actin Total Extimated Cost Total Actin Total Extimated Cost Total Actin Total Actin Total Extimated Cost Total Actin Total Actin Total Extimated Cost Total Actin Total Actin	Somerville					FFY of Grant Approval:
State Estimated Cost Total Estimated Total Actual Cost Actual Actual Cost Actual Cost	Type of Grant ☐ Original Annual Statement ☐ Performance and Evaluation	n Renor		Revised Annual Statement (revis	ion no:)	
of line 21) 3 \$165,980.40 Revised 3 Obligated 4 10% of line 21) \$100,000 10% of line 21) \$82,990 \$17,300 \$45,000 \$25,000 \$25,000	Summary b	v Development Account	Total	Estimated Cost		ital Actual Cost 1
ed 20% of line 21) ³ \$165,980.40 sxceed 10% of line 21) \$82,990 Sxceed 10% of line 21) \$82,900 Sxceed 10% of line 21) \$82,000		The state of the s		Revised ²		Expended
ed 20% of line 21) ³ nts exceed 10% of line 21) Nonexpendable tration	Total non-CFP Funds	FP Funds				
exceed 10% of line 21) Nonexpendable tration	1406 Opera	tions (may not exceed 20% of line 21) ³	\$165,980.40			
exceed 10% of line 21) Nonexpendable tration	1408 Mana	gement Improvements	\$100,000			
Nonexpendable	1410 Admi	1410 Administration (may not exceed 10% of line 21)	\$82,990			
Nonexpendable	1411 Audit					
Nonexpendable Nonexpendable tration	1415 Liqui	1415 Liquidated Damages				
Nonexpendable Nonexpendable tration	1430 Fees and Costs	and Costs	\$17,300			
Nonexpendable	1440 Site /	1440 Site Acquisition				
Nonexpendable	1450 Site I	1450 Site Improvement	\$45,000			
Nonexpendable tration	1460 Dwel	1460 Dwelling Structures	\$393,631.60			
tration	1465.1 Dw	1465.1 Dwelling Equipment—Nonexpendable				
tration	1470 Non-	1470 Non-dwelling Structures			Andrea militari di mandra di m	
lition g to Work Demonstration ccation Costs opment Activities 4	1475 Non-	1475 Non-dwelling Equipment	\$25,000			
g to Work Demonstration Scation Costs Opment Activities 4	1485 Demolition	olition				
ocation Costs opment Activities ⁴	1492 Movi	1492 Moving to Work Demonstration			***************************************	
opment Activities 4	1495.1 Rel	1495.1 Relocation Costs				
	1499 Devel	1499 Development Activities 4				

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF finds shall be included here.

Office of Public and Indian Housing OMB No. 2577-0226 U.S. Department of Housing and Urban Development Expires 4/30/2011

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report Capital Fund Financing Program

Part I: Summary	ummary				
PHA Name: Somerville Housing Authority	e: Housing Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:		FFY of G	FFY of Grant Approval:	
Type of Grant					
	Original Annual Statement	icies	☐ Revised Ann	☐ Revised Annual Statement (revision no:	
Perfo	Performance and Evaluation Report for Period Ending:		☐ Final Perfor	Final Performance and Evaluation Report	
Line	Summary by Development Account	Tc	Total Estimated Cost	Total Ac	Total Actual Cost 1
		Original	Revised 2	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA			The state of the s	
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$829,902			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs		The state of the s		
25	Amount of line 20 Related to Energy Conservation Measures	\$260,702			
Signatur	Signature of Executive Director		Signature of Public Housing Director	rector	Date

form **HUD-50075.1** (4/2008)

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

PHA Name: Somerville F Massachusetts	Iousing Authority Somerville	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	ant No:		Federal I	Federal FFY of Grant: 2012		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	ed Cost	Total Actual Cost	st	Status of Work
				Original	Revised ¹	Funds Funds Deligated ² E	Funds Expended ²	
AMP 1 / Mystic View	Sidewalk+Street Improvement	1450		\$45,000				
	Phase 1 HP Bath Upgrade	1460		\$31,000				
	Energy Cons/Water	1460		\$1,000				
	Phase 1 Boiler Replace	1460		\$50,303				
	Energy Cons/Lighting	1460		\$1,000				
	Common Flooring	1460		877,929.60				
AMP 2 Highland	Paint Balcony Decks	1460		\$1,000				
	Energy Cons/Low Flow Toilets	1460		\$7,000				
Brady Towers	Window Replacement (FA)	1460		\$106,399				
	Elevator Modernization	1460		\$8,000				
Weston Manor	HVAC Control IIn ande	1460	A CONTRACTOR OF THE CONTRACTOR	000 500				
Woodin Manor	Exterior rail treatment	1460		\$5,000				
HAW	Futry Door Security Locks Unarade	1460		10 000				
	anny Sda guard farman farma			20061				

 $^{^1{\}rm To}$ be completed for the Performance and Evaluation Report or a Revised Annual Statement. $^2{\rm To}$ be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part II: Supporting Pages	30						
PHA Name: Somerville Housing Authority Somerville Massachusetts	lousing Authority	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	lo: Grant No:	<u> </u>	Federal FFY of Grant: 2012	2012	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	/ork Development Account No.	Quantity	Total Estimated Cost	t Total Actual Cost	ıl Cost	Status of Work
				Original Revised	sed ¹ Funds Obligated ²	Funds Expended ²	
HAW	MOD Dept Salorie+ Benefits	1410		\$82,990			
AMP 1	Computer + Equipment	1475		\$15,000			
AMP 2	Computer + Equipment	1475		\$10,000			
AMP 1	Office Equipment	1408		\$3,000			
AMP 2	Office Equipment	1408		\$3,000			
AMP 1	Staff Training	1408		\$10,000			
AMP 2	Staff Training	1408		\$7,500			
AMP 1	Activity Center Cord	1408		\$25,000			
AMP 1	HTVN Subscription	1408		\$7,000			
AMP 1	Resident+Youth Training	1408		\$42,500			
AMP 2	Resident Training	1408		\$2,000			
HAW	A/E Fees	1430		\$17.300			
HAW	Operations	1406		\$165,980.40			

 $^{^1{\}rm To}$ be completed for the Performance and Evaluation Report or a Revised Annual Statement. $^2{\rm To}$ be completed for the Performance and Evaluation Report.

form HUD-50075.1 (4/2008)

Annual Statement/Performance and Evaluation Report

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

THE PARTY OF THE P	Federal FFY of Grant:	Reasons for Revised Target Dates ¹						-				
	Fe	All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date									-
		All Funds (Quarter Er	Original Expenditure End Date									
Financing Program		All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date									
edule for Capital Fund		All Fund (Quarter E	Original Obligation End Date									
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name:	Development Number Name/PHA-Wide Activities								-		

1 Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financing Program			
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Par	Part I: Summary					
Son	Somerville Housing Authority		Somerville Mass		Original 5-Year Plan	Revision No:
Ą.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016
B.	Physical Improvements Subtotal	ANGORA SERGEORECK	\$417,128	\$417,128	\$417,128	\$417,128
ن	Management Improvements		\$90,000	\$90,000	\$90,000	\$90,000
D.	PHA-Wide Non-dwelling Structures and Equipment		\$40,000	\$40,000	\$40,000	\$40,000
пі	Administration		\$78,161	\$78,161	\$78,161	\$78,161
н.	Other					
G.	Operations		\$156,322	\$156,322	\$156,322	\$156,322
H.	Demolition					
_ ;	Development					
J.	Capital Fund Financing – Debt Service				-	
74	Total CFP Funds		\$781,611	\$781,611	\$781,611	\$781,611
ľ.	Total Non-CFP Funds					
M.	Grand Total					

form HUD-50075.2 (4/2008)

Par	Part I: Summary (Continuation)	rtion)				STREET, TO
Sor	Somerville Housing Authority		Somerville Mass		Original 5-Year Plan	☐Revision No:
Y.	Development Number and Name	Work Statement for Year 1 FFY <u>2012</u>	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016
	AMP 1/Mystic View		\$105,000	106,000		\$150,000
	AMP 2/ Highland		\$30,000	\$120,000	\$117,128	\$60,000
	Brady Towers		\$76,000	\$75,000		
	Weston Manor		\$206,128	\$116,128	\$18,000	\$105,000
	Ciampa Manor				\$132,000	\$25,000
	Properzi Manor				\$150,000	\$77,128
	PHA Wide Non Dwelling		\$40,000	\$40,000	\$40,000	\$40,000

form HUD-50075.2 (4/2008)

Capital Fund Program—Five-Year Action Plan

art II: Sup	Part II: Supporting Pages – Physical Needs Work Statement(s)	al Needs Work State	ment(s)		***************************************	
Work Statement for	Wor	Work Statement for Year 20	<u>2013</u>	Work	Work Statement for Year: 2014 FFY	14
Year 1 FFY	Development Number/Name General Description of	Quantity	Estimated Cost		Quantity	Estimated Cost
	Major Work Categories			Major Work Categories		
11/2000	AMP 1/ Mystic View			AMP 1/ Mystic View		·
		-				
State/bent///	Entry Door Upgrade		\$35,000	Main Roof Replace		\$75,000
				Landscape		\$1,000
	Phase 2 HP Bath		\$30,000	Phase 3 HP Bath		\$30,000
	Entry Security System		\$10,000	AMP 2 Highland		
				Kitchen Upgrades		\$70,000
	Phase 2 Boiler Replace		\$30,000	Boiler Replace		\$50,000
	AMP 2 Highland		\$30,000	Brady Towers		To the second se
	Common Flooring			Boiler Replace		\$75,000
			The state of the s			
	Brady Towers			Weston Manor		
	Balcony Doors		\$75,000	HVAC Controls Upgrade		\$116,128
	Energy Cons Insulation		\$1,000			
	Weston Manor			PHA wide non-dwelling structures and equip		\$40,000
	Trash compactor		\$50,000			
	HVAC controls upgrade		\$156,128			
	PHA wide non-dwelling Structures and equip		\$40,000			
		Subtotal of Estimated Cost	\$ 100	Subto	Subtotal of Estimated Cost	\$457,128
			437,120			

Capital Fund Program-Five-Year Action Plan

Part II: Sup	Part II: Supporting Pages - Physical Needs Work Statement(s)	Needs Work State	ment(s)			
Work Statement for	Work	k Statement for Year 20	<u> </u>	Work S	Work Statement for Year: 2016 FFY	91
Year 1 FFY	Development Number/Name General Description of Maior Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Maior Work Categories	Quantity	Estimated Cost
	AMP 1/ Mystic View			AMP 1/ Mystic View		
11/20000X				Phase 2 Roof Replace		\$150,000
Statienson	AMP 7 Highland			AMP 2 Hiohland		
	Main Roof Replace		\$117,128	Elevator Modernization		\$60,000
						TAXABLE PARTY OF THE PARTY OF T
	Brady Towers			Brady Towers		
	Weston Manor			Weston Manor		THE PROPERTY AND A STATE OF THE PARTY AND A ST
	Common Floor Replace		\$18,000	Elevator Modernization		\$60,000
		1		Site Improvements		\$45,000
	Ciampa Manor			Ciampa Manor		
	Phase 1 Kitchen		\$132,000	Common Flooring Replacement		\$25,000
	Properzi Manor			Properzi Manor		
	Phase 1 Bath Upgrades		\$150,000	Phase 2 Bath Upgrades		\$77,128
	PHA wide non-dwelling structures and equipment		\$40,000	PHA wide non-dwelling structures + equipment		\$40,000
	Subtot	Subtotal of Estimated Cost	\$ 457,128	Subtot	Subtotal of Estimated Cost	\$ 457,128
William Comment	7					

Part III: Sup	Part III: Supporting Pages - Management Needs Work	Statement(s)		
Work	Work Statement for Year 20	2013	nent for Year:	2014
Statement for	FFY		FFY	
Year 1 FFY	Development Number/Name	Estimated Cost	Development Number/Name	Estimated Cost
THE THE PERSON NAMED IN COLUMN TO PAGE 1	General Description of Major Work Categories		General Description of Major Work Categories	
11/1/896/89/1/1/	HAW	\$90,000	HAW	\$90,000
///Stationaley				
			And Control of the Co	
			Library Control of the Control of th	THE PARTY OF THE P
				Smith Co.
				The state of the s
			The state of the s	
			- CALLE MATERIAL .	
	Subtotal of Estimated Cost	\$ 90,000	Subtotal of Estimated Cost	\$ 90,000

form HUD-50075.2 (4/2008)

Work Statement for Year Statement for Year I FFY Work Statement for PFY Work Statement for PFY Work Statement for PFY	Part III: Su	Part III: Supporting Pages - Management Needs Work Statement(s)	Statement(s)		ALATA IN THE FEB.
Development Number/Name General Description of Major Work Categories HAW S90,000 HAW General Description HAW S90,000 HAW Subtotal of Estimated Cost	Work	Work Statement for Year 20	15	ment for Year:	<u>2016</u>
General Description of Major Work Categories HAW S90,000 HAW General Description General	Statement for	FFY		FFY	
\$90,000 HAW Subtotal of Estimated Cost	Year 1 FFY	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
\$90,000 HAW Make					
\$ 90,000	// Associated	HAW	\$90,000	HAW	\$90,000
\$ 90,000	//Statistical				
\$ 90,000					
\$ 90,000					
\$ 90,000			-		A Marian Walter
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\$ 90,000					
\$ 90,000					
\$ 90,000					
8 90,000				- Company of the Comp	A Laboratory of
			\$ 90,000	Subtotal of Estimated Cost	\$ 90,000

form HUD-50075.2 (4/2008)

Office of Public and Indian Housing U.S. Department of Housing and Urban Development OMB No. 2577-0226 Expires 4/30/2011

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

Part I: Summary	ummary				q
PHA Nam Authority	PHA Name: Somerville Housing Grant Type and Number Capital Fund Program Grant No: MA06P03150111 Replacement Housing Factor Grant No: Date of CFFP:	50111			FFY of Grant: 2011 FFY of Grant Approval:
Type of Grant ⊠ Original A ☐ Performan	Type of Grant Solviginal Annual Statement Performance and Evaluation Report for Period Ending:		Revised Annual Statement (revision no: Final Performance and Evaluation Report	ion no:) on Report	
Line	Summary by Development Account	Total Est	Total Estimated Cost		Total Actual Cost 1
		Original	Revised ²	Obligated	Expended
-	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$146,235			
3	1408 Management Improvements	\$90,000			
4	1410 Administration (may not exceed 10% of line 21)	\$73,117			
S	1411 Audit				
9	1415 Liquidated Damages				
7	1430 Fees and Costs	\$34,825			WHEN THE PROPERTY OF THE PROPE
8	1440 Site Acquisition				
6	1450 Site Improvement	\$30,000			
10	1460 Dwelling Structures	\$332,002			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$25,000			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

			no:)	leport	Total Actual Cost 1	Expended					0						Date 11/11
	FFY of Grant Approval:		☐ Revised Annual Statement (revision no:	Final Performance and Evaluation Report		Obligated					0						ing Director
	H H		☐ Revis	☐ Final	Total Estimated Cost	Revised 2	T T T T T T T T T T T T T T T T T T T										Signature of Public Housing Director
			nergencies		Tot	Original	THE PERSON NAMED IN COLUMN NAM				\$731,179						Date 12/18/11 S
	Grant Type and Number Capital Fund Program Grant No: MA06P03150111 Replacement Housing Factor Grant No: Date of CFFP:		Statement Reserve for Disasters/Emergencies	Performance and Evaluation Report for Period Ending:	Summary by Development Account		1501 Collateralization or Debt Service paid by the PHA	9000 Collateralization or Debt Service paid Via System of Direct	Payment	1502 Contingency (may not exceed 8% of line 20)	Amount of Annual Grant:: (sum of lines 2 - 19)	Amount of line 20 Related to LBP Activities	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Energy Conservation Measures	nestur.
Part I: Summary	PHA Name: Somerville Housing Authority	Type of Grant	Original Annual Statement	Performance and	Line Summar		18a 1501 Coll	18ba 9000 Coll		19 1502 Con	20 Amount o	21 Amount o	22 Amount o	23 Amount o	24 Amount o	25 Amount o	Signature of Executive Director

⁽Lobbe completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

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Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

A lyame: Somerville		CO CO COLOR - + CO CO			7000	HV OT (-FORT 21			
	PHA Name: Somerville Housing Authority C C C H	Crain Lype and Number Capital Fund Program Grant No: MA06P031501111 CFFP (Yes/ No): Replacement Housing Factor Grant No:	nt No: MA06P03150 stor Grant No:	Ξ			1		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	ork Development Account No.	t Quantity	Total Estimated Cost	ed Cost	Total Actual Cost	Sost	Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
AMP 1 Mystic View 31-1	Landscape	1450		\$10,000					
	Energy Cons. Reduce Water Consumption	1460		\$1,000					
	Energy Cons. Insulation & Wthstripping	1460 ping		\$1,000					
	Energy Cons. Common area lighting	g 1460		\$1,000					
	Electrical Upgrade & Security Cameras	eras 1460		\$35,000					-
	Common Hall Flooring	1460		\$67,131					
									_
AMP 2									7
Highland 31-2	Structural Balcony repairs	1460		\$49,568					
	Energy Cons. Insulation & Wthstripping			\$1,000					-
	Energy Cons. LF Toilets (FA	1460		\$32,000					
Dunder 21 2	Rira Danal I Ingrades	1460		\$7.800					
0.10 (1	Energy Cons. LF Toilets (FA)	1460		\$41,503					-
HAW	OPERATIONS	1406		\$146,235					

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part II: Supporting Pages			***************************************					
PHA Name: Somerville Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P031501111 CFFP (Yes/No): Replacement Housing Factor Grant No:	o: MA06P031501 rant No:	=	Federal Fl	Federal FFY of Grant: 2011	=	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	ost	Status of Work
				Original Rev	Revised ¹	Funds Obligated ²	Funds Expended ²	
Weston 31-7	Landscape, parking lot improvements	1450		\$20,000				
	Exterior Electrical upgrades	1460		\$5,000				
	Common area flooring	1460		\$5,000				
		many.						
Properzi MA03100021 AMP 4 Pending	Rehab 2 units into H/C accessible to comply with VCA	1460		\$85,000				
HAW	Mod Dept Salaries \$ Benefits	1410		\$73,117			-	
AMP 1	Computers & Equipment	1475		\$15,000				
AMP 2	Computers & Equipment	1475		\$10,000				
AMP 1	Office Equipment	1408		\$3,000			ļ	
AMP 2	Office Equipment	1408		\$3,000				
AMP 1	Staff Training	1408		\$10,000				
AMP 2	Staff Training	1408		\$7,500				
AMP 1	Activity Center Coordinator	1408		25,000				
AMP 1	HTVN Subscription	1408		\$7,000				
AMP 1	Resident & Youth Training Activities	1408		\$32,500				
AMP 2	Resident Training Activities	1408		\$2,000				
	SUBTOTAL			\$193,161				
HAW	AE Fees	1430		\$34,825				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

:													
THE PARTY OF THE P	Federal FFY of Grant:	Reasons for Revised Target Dates					 THE PARTY OF THE P	***************************************	THE PROPERTY CONTRACTOR OF THE PROPERTY CONTRACT	200077	 TOTAL TOTAL	Annual Control of the	A A A A A A A A A A A A A A A A A A A
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date	8/2/2015	77								
		All Fund (Quarter E	Original Expenditure End Date										
Financing Program		All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date	8/3/2013									
dule for Capital Fund		All Fun (Quarter]	Original Obligation End Date										
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name:	Development Number Name/PHA-Wide Activities											

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

	Federal FFV of Grant:	Reasons for Revised Target Dates ¹				A A A A A A A A A A A A A A A A A A A					The state of the s	
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date								annous .	***************************************
		All Funds (Quarter E	Original Expenditure End Date									
Financing Program		All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date									
edule for Capital Fund		All Fund (Quarter E	Original Obligation End Date									
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name:	Development Number Name/PHA-Wide Activities										

1 Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

	A CARLON CONTRACTOR CO				
Part I: Summary	ummary				
PHA Name: 0	Grant Type and Number Capital Fund Program Grant No: MA06P031 Replacement Housing Factor Grant No: Date of CFFP:	50110			FFY of Grant Approval:
Type of Grant Original A	nnual Statement		Revised Annual Statement (revision no: Final Performance and Evaluation Report	sion no:) ion Report	
Ţij	Summary by Development Account	Total Es	Fotal Estimated Cost		Total Actual Cost 1
	The first of the f	Original	Revised2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	157,801	156,322	78,161	78,161
3	1408 Management Improvements	90,006		50,222.19	50,222.19
4	1410 Administration (may not exceed 10% of line 21)	78,900	78,161	48,567.96	48,567.96
5	1411 Audit				
9	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000		1,807	1807.
8	1440 Site Acquisition				
6	1450 Site Improvement	30,000		0	0
10	1460 Dwelling Structures	347,303		137,799.03	137,799.03
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	20,000		0	0
13	1475 Non-dwelling Equipment	45,000	39,825	0	0
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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⁴ RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Annual Statement/Performance and Evaluation Report

Capital					Expires 4/30/2011
Part I: Summary	ummary				******
PHA Name: SOMERVILLE HOUSING AUTHORITY	Capital Fund Program Grant No: MA06P03150110 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2010 FFY of Grant Approval:	
Type of Grant	rant				
Origi	Original Annual Statement Reserve for Disasters/Emergencies	icies		Revised Annual Statement (revision no:	
Perfo	Performance and Evaluation Report for Period Ending:		□ Fin	Tinal Performance and Evaluation Report	
Line	Summary by Development Account	Tota	Total Estimated Cost) John	Fotal Actual Cost 1
		Original	Revised 2	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	789,004	781,611	316,557.18	316,557.18
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	192,203			
Signatu	Signature of Executive Director Meddud Da	Date /2/28/1) Sig	Signature of Public Housing Director	ısing Director	Date

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part II: Supporting Pages								
PHA Name: SOMERVII	LE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: MA06P03150110 CFFP (Yes/No): Replacement Housing Factor Grant No:	: MA06P031501 ant No:	10	Federal	Federal FFY of Grant: 2010	01	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	lost	Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1	Mystic View: Landscape Site Imp	1450		10,000				
	Mystic View: Security Cameras	1460		5,000				
AMP 2	HIGLAND GARDENS							
31-2A	AE Fees	1430		15,000	7,500	1807	1807	
31-2b	Renovate Vesibule	1460		10,000	25,000			-
31-2c	Window & Door Replacement (FA)	1460		192,303	202,303	137,799.03	137,799.03	
AMP 2	BRADY TOWERS							
31-3a	A/E Fees	1430		5,000				
31-3b	Front Entryway Upgrades	1460		55,000	0			
31-3c	Landscape Improvements	1450		5,000				
31-3d	Roof Replacement	1460		0	55,000			
AMD	WESTON MANOD							
31-7A	WESTON MANON	1430		15 000	7 500			
31-7C	Public Bathroom Upgrades	1460		40,000	55,000			
31-7C	Exterior Eectric Improvements	1460		5,000				
	DWELLING STRUCTURE TOTAL			347,303				
AMP 1	OFFICE EQUIPMENT	1408		2,550				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

Part II: Supporting Pages								
PHA Name: OMERVILI	E HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: MA06P015010 CFFP (Yes/ No): Replacement Housing Factor Grant No:	: MA06P01501C ant No:		Federal	Federal FFY of Grant: 2010	10	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	ited Cost	Total Actual Cost	Sost	Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1	OPERATIONS	1406		80,478		78,161	78,161	
AMP 1	Site Improvements	1450		15,300	5,300			
AMP 1	Computer/Equipment Upgrades	1475		15,000				
AMP 1	Maint Truck	1475		15,300	12,500			
AMP 1	Staff Training	1408		10,200				
AMP 1	MAC Improvements (HUD Approval)	1470		40,000	20,000			
AMP 1	HTVN Subscriptions	1408		7,000				
AMP 1	Resident & Youth Training Activities	1408		15,300		15,300	15,300	
AMP 1	Activity Center	1408		25,000		25,000	25,000	
AMP 1	Asset Based Conversion Ongoing	1408		1,530				
AMP 2	OPERATIONS	1406		77,323	75,844			
AMP 2	Staff Trainning	1408		9,800				
AMP 2	Maint Truck	1475		14,700	12,325			
AMP 2	Office Equipment	1408		2,450				
AMP 2	Site Improvements	1450		14,700	9,700			
AMP 2	Resident Training Activites	1408		14,700		9922.19	9922.19	
AMP 2	Asset Based Conversion Ongoing	1408		1,470				
HAW 1	Mod Dept Salaries & Benefits	1410		78,900	78,161	48567.96	48567.96	
	TOTAL			781,611	781,611	316,557.18	316,557.18	

 $^{^1{\}rm To}$ be completed for the Performance and Evaluation Report or a Revised Annual Statement. $^2{\rm To}$ be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program, Capital Fund Financing Program

A Name: Development Number	Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Development Number All Fund Obligated	ital Fund Financing Program	All Fund	All Funds Expended	Federal FFY of Grant: Reasons for Revised Target Dates ¹
	(Quarter E Original Obligation End	(Quarter Ending Date) ginal Actual Obligation ion End End Date	(Quarter E Original Expenditure End Date	(Quarter Ending Date) anditure Actual Expenditure End te Date	
1 1	Date 7/14/2012			7/14/2014	
	7/14/2012			8/2011	
	7/14/2012			7/14/2014	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

	Federal FFY of Grant:	Reasons for Revised Target Dates ¹										
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date									
		All Fund (Quarter E	Original Expenditure End Date							-		
Financing Program		All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date									
dule for Capital Fund		All Fund (Quarter F	Original Obligation End Date									
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name:	Development Number Name/PHA-Wide Activities										

¹Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

Part I: Summary	ummary				
PHA Name: Authority	PHA Name: Somerville Housing Grant Type and Number Capital Fund Program Grant No: MA06P031 Replacement Housing Factor Grant No: Date of CFFP:	601051		FFY FFY	FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant	pe of Grant Original Annual Statement Reserve for Disasters/Emergencies	Revise	Revised Annual Statement (revision no:	(
I ine	Performance and Evaluation Report for Period Ending: ne Summary by Develonment Account	Total Estimated Cost	Performance and Evaluation Report	Total Actual Cost	ual Cost 1
	and the fact of th	Original Revised ²	ed ² Obligated		Expended
1	Total non-CFP Funds				
7	1406 Operations (may not exceed 20% of line 21) ³	157,801	157,801		157,801
3	1408 Management Improvements	00006	000'06		000'06
4	1410 Administration (may not exceed 10% of line 21)	78,900	78,900		78,900
5	1411 Audit				
9	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000	18,167.75	.5	18,167.75
&	1440 Site Acquisition				
6	1450 Site Improvement	30,000	0		0
10	1460 Dwelling Structures	327,303	444,135.25	.25	444,135.25
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	40,000	0		0
13	1475 Non-dwelling Equipment	45,000	0		0
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
91	1495.1 Relocation Costs				
17	1499 Development Activities 4				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

U.S. Department of Housing and Urban Development

Annual Capital 1 Capital 1	Statemen Fund Prog Fund Fin	Annual Statement/Ferformance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	жand		O.S. Department of rec Offic	O.S. Department of froughing and Orban Development Office of Public and Indian Housing OMB No. 2577-0226
1						Expires 4/30/2011
Part I: S	Part I: Summary					
PHA Name: Somerville E Authority	PHA Name: Somerville Housing Authority	Grant Type and Number Capital Fund Program Grant No: MA06P03150109 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant Approval: FFY of Grant Approval:	
Type of Grant	rant					
Orig	jnal Annus	Original Annual Statement Reserve for Disasters/Emergencies	ıcies	□ Rev	Revised Annual Statement (revision no:	
Perf	ormance at	Performance and Evaluation Report for Period Ending:		Fin	TFinal Performance and Evaluation Report	
Line	Summa	Summary by Development Account	Total Esti	Total Estimated Cost	Tota	Total Actual Cost 1
			Original	Revised 2	Obligated	Expended
18a	1501 Co	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Cc	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Co	1502 Contingency (may not exceed 8% of line 20)				
20	Amount	Amount of Annual Grant:: (sum of lines 2 - 19)	789,004	789,004	789,004	789,004
21	Amount	Amount of line 20 Related to LBP Activities				
22	Amount	Amount of line 20 Related to Section 504 Activities				
23	Amount	Amount of line 20 Related to Security - Soft Costs				
24	Amount	Amount of line 20 Related to Security - Hard Costs				
25	Amount	Amount of line 20 Related to Energy Conservation Measures,	65,000			
Signatu	re of Ex	Signature of Executive Director Joseph R Mach Day	Date 2/14/12 Signati	Signature of Public Housing Director	sing Director	Date
		P 1				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part II: Supporting Pages								
PHA Name: Somerville Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P03150109 CFFP (Yes/No):	: MA06P031501	60	Federal I	Federal FFY of Grant: 2009	60	
	Kepik	Kepiacement Housing Factor Grant No:	ant No:					
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	d Cost	Total Actual Cost	ost	Status of Work
				Original R	Revised ¹	Funds Obligated ²	Funds Expended ²	
31-1a	AE fees	1430		5000		1105	1105	
31-1b	kitchen/bath phase 3	1460		52,303				****
31-10	exterior elec receptacles	1460		5000				
31-1d	exterior landscaping of buildings	1450		5000				
31-le	energy conserve measures- water	1460		1000				
31-1f	boiler room improvement	1460		2000				
31-1g	exterior canopy imp	1460		10,000				
31-1h	upgrade exterior lighting	1460		5000				
31-2a	AE fees	1430		5000				
31-2b	energy conserve measures-water/ lighting	ng 1460		1000				
31-2c	energy conserve measures- insulation			1000				
31-2d	replace boilers	1460		10,000				
31-2e	new roof	1460		20,000				
31-2f	replace windows & balcony doors	1460		10,000		·		
31-2g	boiler room imp.	1460		10,000				
31-2h	renovate vertibule	1460		10,000				
31-2i	waterproof building	1460		10,000				
31-2j	upgrade exterior lighting	1460		10,000				
31-2k	landscape	1450		10,000				

 $^{^1{\}rm To}$ be completed for the Performance and Evaluation Report or a Revised Annual Statement. $^2{\rm To}$ be completed for the Performance and Evaluation Report.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

Part II. Sunnorting Pages	9							
PHA Name: Somerville Housing Authority	Housing Authority	Grant Type and Number Capital Fund Program Grant No: MA06P03150109 CFFP (Yes/ No): Replacement Housing Factor Grant No:	nt No: MA06P03150 for Grant No:	601	Federal	Federal FFY of Grant: 2009	600	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work Development Account No.	t Quantity	Total Estimated Cost	Ited Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
31-3a	AE fees	1430		5000		17,062.75	17062.75	
31-3b	boiler room repl. and improvement	t 1460		10,000				
31-3c	common area vent upgrade	1460		10,000				
31-3d	structural repairs to balconies	1460		10,000		136,816.76	136,816.76	
31-3e	new roof	1460		20,000		269,774.19	269,774.19	
31-3f	energy conserve measures-	1460		1000				***************************************
	light/water/insulation							
31-3g	replace windows	1460		10,000				
31-3h	waterproof exterior building	1460		10,000				
31-3i	upgrade exterior lighting	1460		5000				
31-3j	landscape	1450		5000				
31-7a	AE fees	1430		5000				
31-7b	boiler room repl. and improvement	ıt 1460		5000				
31-7d	landscape	1450		5000	•			
31-7d	new roof	1460		30,000		37,544.30	37,544.30	
31-7e	ventilation	1460		5000				
31-7f	energy conserve measures-	1460		1000				
	light/water/insulation/heat							
31-7g	replace windows	1460		10,000				
31-7h	front canopy imp.	1460		5000				
31-7i	exterior lighting upgrade	1460		5000				

 $^{^1\,\}rm To$ be completed for the Performance and Evaluation Report or a Revised Annual Statement. $^2\,\rm To$ be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Somerville Housing Authority	Housing Authority	Grant Type and Number			Federal F	Federal FFY of Grant: 2009	60	
		Capital Fund Program Grant No: MA06P03150109 CFFP (Yes/ No):	No: MA06P03150	601				
		Kepiacement nousing Factor Grant NO:	Orani No:					
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work Development Account No.	Quantity	Total Estimated Cost	ed Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
31-7j	replace generator	1460		2000				
amp 1	operations	1406		80,478		78,900	78,900	
amp 2	operations	1406		77,323		78,901	78,901	
amp 1	site improvments	1450		15,300				
amp 2	site improvments	1450		14,700				
amp 1	upgrades computers/equipment	1475		15,000				
amp 1	office equipment	1408		2550				
amp 2	office equipment	1408		2450				
amp 1	maintenance truck	1475		15,300				
amp 2	maintenance truck	1475		14,700				
amp 1	staff training	1408		10,200		10,200	10,200	
amp 2	staff training	1408		0086		9,609.46	9,609.46	
amp 1	MAC improvments and renovations***	ns**** 1470		40,000				
amp 1	activity center coor.	1408		25,000		25,000	25,000	
amp 1	HTVN subscription	1408		7000				
amp 1	resident and youth training activities			15,300		30,490.54	30,490.54	
amp 2	resident training activities	1408		14,700		14,700	14,700	
amp 1	assest based conv- ongoing	1408		1530				
amp 2	assest based conv- ongoing	1408		1470				

****Mystic Activity Center: The Somerville Housing Authority intends to finalize the inclusion of the Mystic Activity Center site under the Annual Contributions Contract. SHA acknowledges that funds may not be used until inclusion process and HUD approval is complete.

 $^{^{\}rm i}$ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. $^{\rm 2}$ To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part II: Supporting Pages									
PHA Name: Somerville Housing Authority	lousing Authority	Grant Type a Capital Fund F CFFP (Yes/ N Replacement H	Grant Type and Number Capital Fund Program Grant No: MA06P03150109 CFFP (Yes/ No): Replacement Housing Factor Grant No:	MA06P031501	60	Federal	Federal FFY of Grant: 2009	60	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	-
HAW 1	Mod dept. salaries and benefits	14	1410		78,900		78,900	78,900	
TOTAL					789,004		789,004	789.004	
THE PARTY OF THE P									
MINISTER TO THE PARTY OF THE PA									
•									

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

	Federal FFY of Grant: 2009	All Funds Expended Reasons for Revised Target Dates 1 (Quarter Ending Date)	diture Actual Expenditure End Date					11/2011				2/2012			2/2012					
Part III: Implementation Schedule for Capital Fund Financing Program	g Authority	All Fund Obligated (Quarter Ending Date)	Original Actual Obligation Original Expenditure Obligation End Date End Date Date		09/14/2011				9/14/2011						9/14/2001					
Part III: Implementation Schedul	PHA Name: Somerville Housing Authority	Development Number Name/PHA-Wide Activities		AMP 1 Mystic View	Kitchen / baths	Exterior upgrades elec	Boiler improvements	Repair Ext Canopy	AMP 2 Highland Gardens	Energy Conservation	Replace Boilers	New Roof	Replace window/balcony	doors/ waterprooting	AMP 2 Brady Towers	Boiler Replacement	Vent upgrades	Balcony Repairs	New Roof/Windows	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

	Federal FFY of Grant: 2009	Reasons for Revised Target Dates ¹														
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date	The state of the s	09/14/2013											
***************************************		All Funds (Quarter E	Original Expenditure End Date													***************************************
Financing Program		All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date		09/14/2011											
dule for Capital Fund	ng Authority	All Fund (Quarter E	Original Obligation End Date													
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: Somerville Housing Authority	Development Number Name/PHA-Wide Activities		AMP2 Weston Manor	Replace Boilers	New Roof	Ventilation	Energy conservation	Replace windows	Canopy Repair	Exterior Light upgrade	Replace generator				

¹Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

(REFERRED TO IN PLAN AS ATTACHMENT A)

FINANCIAL RESOURCES SOMERVILLE HOUSING AUTHORITY

Financial Resource: 2012 Planned Sources and Uses

<u>2012</u> Planned	Sources and Uses	
Sources	Planned \$	Planned Uses
1. Federal Grants (FYB2012grants)		
a) Public Housing Operating Fund	1,940,157	Daily Operations
b) Public Housing Capital Fund 2012	829,902	Federal Mod
c) Annual Contribution SRO	121,421	Haps SRO 1& 3
Tenant Based Assistance	15,709	Admin
d) HOPE VI Demolition	0	
e) Annual Contribution for Section 8	13,467,495	Haps Sec 8 Admin
Tenant -Based Assistance	1,225,676	Admin
f) Public Housing Drug Elimination	0	
Program (including any Technical		
Assistance funds)		
g) Resident Opportunity and Self	85,647	Resident Service Balance
Sufficiency Grants		as of 12/2011
Resident Opp and Self Sufficiency Grant	80,000	
h) Community Development Block Grant	N/A	
i) HOME	N/A	
Other Federal Grants (list below)		
2. Prior Year Federal Grants		
(un-obligated funds only) (list below)		
Capital Fund 2010 as of 12/31/11	395,044.68	Capital improvements
Capital Fund 2011	731,179	66 66
Capital Fund		66 66
3. Public Housing Dwelling Rental	2,197,500	PH OPERATIONS
Income		
4. Other income (list below)		
Excess Utility		-
Miscellaneous / Laundry Receipts	18,000	PH OPERATIONS
Investment	4,500	PH OPERATIONS
5. Non-Federal Sources		
Non dwelling rent cell tower revenue	198,919	PH OPERATIONS
Total Resources	21,311,149.68	

Somerville Housing Authority Board of Commissioners 2012

Ronald Bonney, Chairman 28 Vinal Avenue Somerville, MA 02143

James McCallum, Vice-Chairman 145 Sycamore Street Somerville, MA 02145

Robert Racicot, Treasurer 4 Newman Place Somerville, MA 02145

Tanya Cafarella, Vice-Treasurer 102 Grant Street, Unit B Somerville, MA 02145

Mary McDonald, Resident Member 13-25 Warren Avenue, Apt. 909 Somerville, MA 02143



RESIDENT ADVISORY BOARD 2010 MEMBERSHIP FOR PHA ANNUAL PLAN 2011

Paul J. Mackey: Blanca Bonilla:

Susan Hegal: Ellen Shachter:

Edward Marquardo: Elizabeth Medeiros: Charles Pike

Pierre Jean-Louis:

Somerville Housing Authority Somerville Housing Authority

Cambridge & Somerville Legal Services Cambridge & Somerville Legal Services

RESIDENT, Weston Manor RESIDENT, Properzi Manor RESIDENT, Highland Gardens

Mystic Tenant Association



SOMERVILLE HOUSING AUTHORITY

30 Memorial Road, Somerville, Massachusetts 02145 Telephone (617) 625-1152 Fax (617) 628-7057 TDD (617) 628-8889

IMPORTANT PUBLIC NOTICE

The Somerville Housing Authority (SHA) announces a **PUBLIC HEARING** regarding the **2012 Annual Plan** on Wednesday,
December 14, 2011 at 6:30 p.m., at Properzi Manor, 13-25 Warren
Avenue, Somerville, Massachusetts. The Plan and related documents are available at the Somerville Housing Authority, 30
Memorial Road and the City of Somerville, Housing Division, 50
Evergreen Ave, Somerville, Massachusetts during regular business
hours. A forty-five (45) day review and comment period will commence on **October 25**, **2011**. Any questions may be directed to Paul Mackey, Deputy Director, at 617-625-1152.

10/19/11 The Somerville News



Cambridge & Somerville Legal Services Office

December 13, 2011

Paul Mackey Deputy Director Somerville Housing Authority 30 Memorial Road Somerville, MA 02145

RE: Draft 2012 Annual Plan

Dear Paul:

Thank you for convening the RAB meetings earlier this year. Given that SHA does not plan any major policy changes in the upcoming fiscal year and given the streamlined nature of the Annual Plan template, our comments are brief.

First, we commend SHA for the high quality of its housing programs, and its past responsiveness to community concerns, both in the RAB process and otherwise.

Second, we have a few comments and questions on the draft Integrated Pest Management Policy, which are outlined below.

- * In some cases, tenants and applicants are forced by SHA to discard infested beds, couches, and other furniture and yet, have limited financial resources to replace these furnishings. As you know, this can often happen through no fault of the tenant/applicant and, at least in some cases, the SHA may be legally liable for the cost of replacement furnishings. We suggest that the SHA convene a meeting (with advocates, social service agencies, City officials and perhaps other nearby housing authorities) to brainstorm ways to pay for the replacement furnishings and/or ways to prevent the need to discard the items in the first place (e.g. the heat treatment used by Boston Housing Authority). We heard that CAAS is planning to convene a bedbug summit sometime in spring of 2012 and so assume that CAAS would want to be involved in such a meeting.
- * top of page 2: Will SHA make the monitors available for free upon request? If so, this should be stated.
- * page 3 (Home Visit): The last sentence (about proof of eradication prior to occupancy) should be amended so that it is clear that SHA shall pay for the Orkin or other such inspector and that an apartment will be held if there is any delay in obtaining certification of eradication.

- * page 3 (Unit Transfer): It is unclear what SHA means when it states that "findings... may be considered as part of the selection criteria" for unit transfers. Again, there may be bedbugs without any tenant fault involved. It would be helpful if SHA could explain what it means so that we can then meaningfully respond.
- * page 4 (Encouraging Compliance with reporting pests): SHA indicates that it may be a lease violation if a tenant fails to comply with PMP's preparation instructions. The SHA should amend this to provide that a tenant must have sufficient advance notice for such preparation (3 days?) and can request SHA assistance as a reasonable accommodation. Elsewhere, the SHA indicates it will send notices on Friday for an extermination the following week.
- * (non-bedbug) Extermination Notices and Bedbug Inspection/Treatment Notice: It is easier for tenants to prepare and re-arrange their schedule (for tenants who want to be present) if SHA shortened the block of time from 9:00 to 3:00/4:00 to morning (9:00-12:00) and afternoon (1:00-4:00 or 12:00-3:00).

Third, we continue to remain concerned that SHA plans to project-base 60 (or up to 60) mobile vouchers for housing for elderly/disabled tenants. We believe that the wait for family public housing exceeds the wait for elderly/disabled housing, particularly for Somerville residents. To our knowledge, the SHA has not been able to provide an unduplicated count of persons seeking elderly/disabled housing and seeking family public housing so the data has not been available to precisely analyze the housing needs of the respective groups. In the event, that SHA does proceed with awarding the 60 vouchers for the development of elderly/disabled housing, we do not believe that such new development would be subject to the 20% cap on young disabled residents (which is currently part of SHA's Designated Housing Plan). If you believe otherwise, please share with us your legal authority. Additionally, if SHA intends to impose a cap on young disabled tenants (and is lawfully able to do so), the cap should be significantly higher than 20% given the paucity of one bedroom units available for non-elderly disabled residents.

Thank you for your consideration of our comments, and sorry for the delay. We are unable to attend the December 14, 2011 public hearing and hope that, as in the past, we can continue to talk about these issues after the public hearing/Board meeting.

Sincerely yours,

Ellen Shachter (617) 603-2731

Susan Hegel

(617) 603-2712



SOMERVILLE HOUSING AUTHORITY

30 Memorial Road Somerville, Massachusetts 02145 Telephone (617) 625-1152 Fax (617) 628-7057 TDD (617) 628-8889

December 14, 2011

Ellen Shachter Susan Hegel GBLS 60 Gore Street Suite 203 Cambridge MA 02141

RE: Comments 2012 Annual Plan

Dear Ellen and Susan:

Thank you for your recent comments on our 2012 Annual Plan. In addition, we are grateful for all your efforts in assisting SHA and its residents with the preparation of this plan through your participation on the Resident Advisory Board.

Response to comments by asterisk *

- Once it is determined that an item or items of furnishings are contributing to efforts to effectively exterminate an area, SHA requests the tenant discard the item(s). SHA works with the tenant to determine the impact of that request and assist in identifying possible resources to replace item(s). We will continue to work with tenants, advocates and others to educate and explore treatment options. SHA added language clarifying that "where a tenant is not a fault, SHA will be responsible for replacement of item(s) removed.
- SHA will continue to pay and provide all monitoring devices.
- We have revised language to clarify that home visit/inspections are paid by SHA.
- SHA has highlighted the language that states "such findings MAY be considered"
- SHA will provide notice in accordance with lease provisions.
- In order to effectively use vendor time, SHA must continue its timeframe for treatment provided in the Notice. Often due to non-preparedness, the vendor must move on to other building/units and the daily schedule must be fluid in order to use time effectively.

Translation services available upon request, by appointment only Services d'interprétation est disponible. <<Sur rendez-vous>> Servicio de traducción está disponible, con cita, unavez quelo solicite



Re: Comment on use of Project Based Vouchers.

SHA continues to make every effort to meet the needs of Somerville residents. We anticipate awarding up to 60 PBV's for the creation of 60 permanently affordable senior and non-elderly disabled housing units. The opportunity to create additional permanently affordable public housing is rare. Available public funds are decreasing and public housing is not being created without the use of mixed-financing and PBV's. Even after a successful award of 60 PBV's, SHA will not be exceeding 20% of total allocation.

To specifically address the need to house non-elderly disabled population, SHA applied for and received an additional 100 DHAP vouchers for 1-bedroom non-elderly disabled families. This increased our total DHAP to 250 vouchers. As of this date, SHA has a 98% utilization rate.

To address families separated and in need of appropriate housing to facilitate unification, SHA applied for and received 50 FUP vouchers. As of this date, SHA has a 90% utilization rate.

SHA is committed to maintaining an appropriate balance of available resources and opportunities that best address the needs of Somerville residents. We look forward to continuing this successful balance as we face new challenges ahead.

Thank you once again for your thoughtful comments and efforts.

Regards,

Paul J. Mackey
Deputy Director



SOMERVILLE HOUSING AUTHORITY POLICY AND PROCEDURE INTEGRATED PEST MANAGEMENT

THE SOMERVILLE HOUSING AUTHORITY (SHA) is committed to manage pests using Integrated Pest Management (IPM). IPM includes early detection of new infestations through regular inspection and monitoring, preventing pests by exclusion, design and good sanitation and taking appropriate control actions when necessary. IPM principles are implemented by the most economical means and with the least possible hazard to people, property and the environment.

In order to successfully eradicate a bed bug infestation, it is essential that all people involved work together. The Somerville Housing Authority understands the following about property-wide bed bug control:

- Although bed bugs are not known to transmit blood borne diseases, they cause a lot of stress to people and can be the cause of skin infections and allergic reactions. The Centers for Disease Control and Prevention (CDC) and the Environmental Protection Agency (EPA) classify bed bugs as a pest of public health significance.
- Regardless of how the infestation started, it was certainly unintentional and if there is no cooperation everyone loses. There should be no shame associated with having bed bugs in an apartment. Although clutter makes it more difficult to eradicate bed bugs, cleanliness cannot prevent the problem from occurring. Denial, shame and blame only make the situation worse. Once an infestation has been identified, the most important thing is to take steps to eliminate it and prevent spread.
- Early detection and intervention is the goal of the IPM program. To reach this goal, the Somerville Housing Authority will conduct a building-wide inspection and monitoring for all pests of all rooms periodically in buildings with known infestations and once a year in buildings without infestation. This inspection and monitoring will consist of questioning residents and staff, visual inspection, monitor placement and other methods as determined to be necessary.
- Once a bed bug infestation has been identified, it takes considerable work to get rid of it.

 Effective treatment requires the cooperation of at least three parties working together: resident, SHA staff and the pest management professional (PMP). Without the participation of all three, it will be nearly impossible to eliminate an infestation. If a resident cannot prepare for treatment, the SHA may need to reach out to family or local support groups.
- Many people are uninformed about bed bugs and they don't understand what must be done to eradicate this pest. If you feel that a resident, contractor or property manager is not handling the situation properly, suggest that they read through this document and view the suggested resources.
- Where the resident is not at fault the SHA will be responsible for the replacement of any items removed due to infestation.

- The SHA will make the following available to residents:
 - o Monitors such as glue boards or other monitoring devices that becomes available.
 - o Rip resistant mattress and box spring encasements;
 - o Plastic bags for furniture removal;

For bed bugs, Somerville Housing Authority is utilizing IPM according to the plan detailed below.

<u>PREVENTION</u>

Internal outreach efforts: Somerville Housing Authority educates our SHA community about bed bugs. To ensure material is science-based and correct, SHA consults with PMP. Information includes pictures of bed bugs, where they like to hide, how to avoid bringing bed bugs home and what residents should do if they find a bed bug in their unit. The following are used to deliver the information:

- o Flyers delivered to residents;
- o Provide informational pamphlets to residents and in common areas;
- o Training sessions conducted by SHA or PMP for staff and residents;
- Local mass media.
- External outreach efforts: An infestation of bed bugs can begin from any number of sources. In multifamily housing, common sources may include:
 - o used furniture and items from unknown sources;
 - o friends and family who are visiting or hosting residents;
 - o visiting professionals such as cleaning contractors and home health aides.

To get at these various sources of bed bugs Somerville Housing Authority educates people in our community associated with these sources on how to avoid spreading bed bugs. The following are used to deliver the information:

- o Flyers delivered to agencies, residents, and visitors;
- Provide informational pamphlets to residents and in common areas. Training sessions conducted by PMP for staff and residents to which professionals outside the SHA are invited;
- o Local mass media.
- Unit turnover and move- in procedures: Staff and contractors working in vacant units inspect for bed bugs on items left by the former resident, around the unit and behind fixtures such as baseboards. Admission staff asks new residents about any previous exposure to bed bugs and provides information on how to limit the chance of bringing bed bugs to the property.

Housing is not to be denied because of previous bed bug exposure, but the SHA works with the resident and a PMP to ensure belongings are moved into the new home without bed bugs. Bed bug monitors are offered to the resident at move in. SHA maintenance staff will take all measures deemed necessary to prevent future infestation of adjacent units. These measures include, but not limited to, sealing potential paths of migration between units and other spaces.

Home visit: The SHA reserves the right, <u>at the expense of the SHA</u>, to conduct a home visit / inspection of a current applicant if the SHA is aware that there are or have been recent infestation problems. SHA may require as condition of occupancy that certification be provided from PMP that the infestation has been eradicated prior to occupancy.

- Unit transfers: When existing resident applies for transfer the SHA shall perform an inspection of their current unit to determine if there is any type of infestation. SHA shall also review all records on the unit to determine if any previous infestation has occurred and treatments have been performed and the bed bugs have been eradicated. Such findings will be reported and may be considered as part of the selection criteria.
- Disposing of large items: Only items specified by the PMP servicing the unit should be disposed of. Residents are to wrap infested items in plastic before moving them out of the unit and to destroy the items once they are outside to prevent others from retrieving infested items and bringing them home. Plastic wrapping material is available from the SHA office. Any large item left outside for trash pick up is considered to be abandoned and to be infested and will be promptly removed from the property. SHA staff shall damage disposed items to prevent reuse by others.
- Preventing spread by SHA staff: When possible, staff meets with residents in common areas where plastic or metal furniture is available. If office staff must meet with a resident in a unit, staff only brings essential items into the unit and will not sit or set items on upholstered furniture. If maintenance staff must move infested items in a unit, they may wear booties and a disposable suit. They should remove and dispose of the protective clothing immediately upon completing work in the unit.

EARLY DETECTION

- **Reporting bed bug evidence:** Residents, staff, and contractors must immediately report any bed bugs or evidence of bed bugs anywhere on the property to 617-625-4522.
- **Bed bug inspections:** Common areas such as laundry facilities, lobbies and community rooms are visually inspected by SHA and PMP as part of the regular service. A minimum of one property-wide inspection per year is recommended.
- **Bed bug monitoring:** Monitors can detect bed bugs on individual pieces of furniture by capturing bed bugs trying to get to or from the item. They work best if the legs of the piece of furniture are the only way for a crawling insect to get on and off the item. Residents may request monitors from the office.

- Making inspection easier by using mattress/box spring encasements: Proper fitting fabric mattress encasements on both the mattress and box spring protect the mattress and keep bed bugs out of the interior of box springs which is very hard to inspect and treat. Residents may purchase encasements at the main office. If the resident has a bed frame, he or she should pad sharp edges that might tear the encasement. Once installed on the mattress, residents should use duct tape to tape over the zipper pull to ensure that it remains fully closed. Beds must be made into islands to the extent that the room and furniture permit. This entails keeping the area under the bed free of clutter and pulling the bed or mattress at least 10 inches away from all walls and bedside furniture. Although not required, using light colored bedding will make inspection easier.
- Encouraging compliance with reporting pests: A bed bug infestation can be stopped quickly and with minimal financial consequences if all members of the IPM team (housing, residents and the PMPs) are involved early-on in the infestation. To promote resident compliance with inspecting units and reporting infestations, Somerville Housing Authority will not charge a resident for pest control or ask him/her to discard belongings unless it is absolutely necessary for effective treatment. If a resident does not comply with the PMP's preparation instructions resulting in the PMP not being able to treat the unit the resident will be required to attend a private conference for lease violations. Additional measures by SHA may include, but not be limited to, assessing a fee to the resident and/or court action. The SHA will provide notice to the resident in accordance with the provisions of the resident's lease with SHA.

DOCUMENTATION

- Identifying trends: To better track the spread of bed bugs throughout our community, plan bed bug treatments and gauge the success of our bed bug management program, bed-bug-specific records will include inspection findings, education efforts and treatment details. The records are kept in the work order system and analyzed by the SHA on a regular basis to identify building-specific patterns of infestation. The work order system should include information from the PMP's service report, which includes the following for each unit:
 - 1. Unit access
 - 2. Pest type(s)
 - 3. Degree of infestation(s)
 - 4. Housekeeping
 - 5. Compliance with preparation instructions
 - 6. Control measures taken
 - 7. Date, Time in and time out
 - 8. Name of SHA Staff

TREATMENT

• Confirming infestation: Before any treatment is scheduled, live bed bugs must be found and identified by trained staff or a PMP.

- Involving a qualified PMP: Once an infestation is confirmed, the PMP is called to inspect and possibly treat the infested unit and all adjacent units within one week. SHA staff works with both the PMP, resident and the resident's family or support service provider to ensure that everyone involved understands the preparation instructions, any of the resident's medical issues that may impact the treatment plan and how to prevent future infestations. All expenses for the PMP's work is paid for by the SHA unless a charge is incurred because the PMP was unable to service the unit due to resident refusal of service or failure to follow preparation instructions.
- Planning the treatment: After inspecting the infested unit and (when an active infestation is found) all adjacent units, the PMP proposes a treatment plan. Treatment plans are approved after considering the burden on the resident, cost of service and risk to people, property and the environment.
- Bed bug treatments: A bed bug treatment requires at least three visits: the first to inspect, plan treatment and treatment; the second and third is to follow up, kill emerged nymphs or confirm bed bug control. More often, treatment requires three or more visits and may take months with periodic follow-ups. The less team members cooperate, the longer the treatment will take. Control is defined as seeing no live bed bugs and the resident not reporting any new bites or sightings. Elimination is considered to be a one year period of control.
- **Discouraging use of store-bought pesticides:** Over-the-counter sprays and foggers are not effective for bed bug control. A licensed PMP does all pesticide application targeting bed bugs.
- Uses of pesticides by the resident are counter productive to the safer and approved methods undertaken by the licensed technician. SHA does not recommend residents using any type of chemicals during or between treatments. Vacuuming infested areas on a daily basis is a safe method of treatment by a resident.

BEDBUG EXTERMINATION PROCEDURES

Notification;

When notification is made by a resident / family member / manager or maintenance staff a work order is placed for treatment / inspection, which will be scheduled for the following Wednesday after written notification is provided to the resident the Friday prior to treatment

Inspection:

Is conducted by SHA / PMP within 48 hours of receipt of a complaint when a complaint of infestation is made, based upon staff availability.

Identification:

Residents are encouraged to provide evidence by catching a sample in a baggie, jar or piece of tape for SHA review to help identify the type of infestation. Monitors will be strategically placed in areas of the unit.

Treatment:

Treatment is conducted by a PMP. Typically three treatments will occur within a period of onemonth. Additional treatments and inspection will occur based upon the level and frequency of activity during the initial process.

Extermination Notification:

Residents are notified in writing on the Friday prior to treatment. An extermination notice is placed under the resident's door with preparation instructions and contact information for any questions. During the process adjacent units will also be notified for inspection and may be treated as a preventive measure.

Bedbug Preparation:

- 1. Preparation requires the resident to strip the bedding on the morning of the extermination. Resident must place all linens in a trash bag to be laundered and dried with high heat. The bags are required to be disposed of directly into the dumpster and not to be re-used, bags can be provided by SHA.
- 2. During the first treatment residents will be provided mattress covers to protect beds and prevent infestation or the need for treatment. An at cost charge for additional covers will be implemented if the original covers are removed or damaged.

In addition residents may be required to do the following items the day prior to treatment:

- 3. Clear all items off the top of furniture and move items approximately one foot from the wall. They will also need to remove items off the floor in each closet.
- 4. Clothing, boxes, books, magazines and other items prone to infestation may be required to be disposed or placed inside plastic storage containers or plastic bags during the treatment period.
- 5. Treatment may consist of inspecting furniture and disassembling beds and frames. Inspection of the inside of furniture including drawers, tops and bottom of tables, lamps, book cases and other items may be necessary.

Bedbug Preparation:

- 6. As a precaution all children's items should be placed out of the areas scheduled to be treated and placed in protective containers or bags.
- 7. Pets such as dogs, cats, birds, turtles and fish need to be removed from the area of treatment for at least 4 hours thereafter.

The treatment process:

PMP will prepare areas by vacuuming and sometimes steaming items which can be difficult to visually inspect or treat thoroughly.

Treatment will also consist of dusting outlets, drilling and treating wall voids, spraying walls along the floor and sealing cracks, crevices and holes.

Other means of protecting furniture and other small household items are to place them inside plastic containers or bags during the process.

Excessive storage and congestion will prevent a detailed inspection and treatment. By disposing of bags, cardboard boxes and other unnecessary items you can prevent possible nesting areas.

Residents should not remove items from the unit until the item has been approved by SHA. Infested items need to be wrapped or placed in plastic bags to prevent transfer of activity.

This needs to be coordinated with SHA so others will not remove items from the dumpster or trash room area.

Prior approval should be given by SHA before purchasing or acquiring new or used furniture to ensure the infestation in the apartment has been adequately eradicated. Residents need to know where the items are coming from and ask if there are or have been any infestation concerns.

Post Treatment Prevention:

- 1. SHA should be notified immediately when activity reoccurs.
- 2. Residents should advise <u>anyone</u> such as family, healthcare workers, homemakers, cable technicians or service agencies who may be entering their unit that there has been an infestation problem and to use caution to prevent any transfer.
- 3. Residents should not use or apply any type of pesticides during or after treatment. Cleaning and vacuuming areas of concern are helpful. Cleaning tools should be washed with hot water and lightly treated with alcohol. Vacuums bags should be placed in another plastic bag and disposed of directly into the trash.
- 4. Lightly spraying alcohol on insect activity or items that have been used to clean infested areas is acceptable. This should be done upon properly ventilating the area and ensuring that there is no open flame or electrical items in operation. Any one with medical or breathing conditions needs to take extra pre-caution.
- 5. Residents should refrain from having guests during the infestation and treatment period to prevent transfer. Residents should also perform self inspections of their apartment,

furnishings and clothes to prevent any transfer when traveling to other homes, businesses etc.

- 6. Items used on a daily basis such as pocketbooks, bags, or clothing should be placed away from areas of infestation or inside protective bags or plastic containers.
- 7. Residents should not take any items from unknown sources or give any personal belongings away to any agency or person. When acquiring furniture and other items each should be thoroughly inspected and residents should ask if there is or have been any infestation issues with the item.
- 8. When traveling or staying elsewhere inspect all items and wash them to prevent possible transfer.
- 9. Continuous inspections after treatment by SHA and the resident will assist in prevention and eradication of the infestation. This will require immediate notification to SHA if there are signs of activity.
- 10. Determining the initial possible cause of infestation is very helpful in the prevention and eradication process.

EXTERMINATION PROCEDURES RODENTS / INSECTS

Notification:

When notification is made by a resident / family member / manager or maintenance staff a work order is placed for treatment / inspection, which will be scheduled for the following Tuesday after written notification is provided to the resident the Friday prior to treatment.

Inspection:

Is conducted by SHA / PMP when complaints of infestation have been made and it is treated as needed.

Identification:

Residents are encouraged to catch a sample in a baggie, jar or piece of tape for our review to help identify the type of infestation. Monitors will be strategically placed in areas of the unit. Treatment and preparation will vary by the type of infestation.

Treatment:

Treatment is conducted by a PMP. Typically three treatments will occur within a period of one-month. Additional treatments and inspection will occur based upon the level and frequency of activity during the initial process.

Extermination Notification:

Residents are notified in writing on the Friday prior to treatment. An extermination notice is placed in their door with preparation instructions and contact information for any questions. During the process adjacent units may also be notified, inspected and treated as a preventive measure depending on the type of infestation.

Preparation:

Residents are required to empty and clean the kitchen cabinets, below the bathroom sink and other areas where there are signs of activity or infestation.

Clearing and cleaning off the tops of the refrigerator, stove and other appliances is required for a more detailed inspection and treatment.

If an adjacent unit is being inspected and a preventive treatment is being conducted at minimum they will need to clear below the kitchen and bathroom sink.

After treatment monitors will be placed in areas for further review and inspection. When an access or travel point has been determined these areas will be sealed by the Authority to prevent additional infestation and nesting.

Residents with activity must also clean areas free of grease, food debris, water, and excessive storage, remove items such as bags and cardboard boxes which become nesting areas.

Upon the removal of dead insects, rodents and their debris the area MUST be thoroughly cleaned and sanitized.

Residents are encouraged not to use any sprays, powders or pesticides since they can counteract with the safer products used by the licensed exterminator. Cleaning, sanitizing, removing congestion and vacuuming are most effective with the eradication of insect and rodent activity.

In some cases of infestation such as meal moths, fruit flies and drain flies these insects are generally eradicated without treatment by determining the source and cleaning the areas affected.

Extermination Notice

On <u>Tuesday</u>, , <u>2011</u> your unit will be inspected and a preventive extermination will be conducted, if necessary, between the hours of 9:00 a.m. and 4:00 p.m.

You are required to prepare your apartment by emptying and cleaning your cabinets and any other areas where there is activity or signs of infestation. If you **do not** have activity just empty below the kitchen and bath sink and clear off the top of the stove and refrigerator.

All units with infestation must:

- · empty all cabinets
- wash and clean the cabinets
- clear off tops of cabinets
- clear off counters,
- clear tops of refrigerator and stove
- any other <u>affected area</u> for a detailed inspection and extermination treatment
- clean the areas free of food debris or grease

**Treatment can not be completed without preparing.

Any questions contact the SHA Housing Inspector at 617-625-1152 X 350.

Dear Resident,

On <u>Wednesday</u>, , <u>2011</u>, the SHA will be performing an inspection/extermination of your apartment for bedbugs.

The Inspection/treatment is scheduled between the hours of 9:00 a.m. and 3:00 p.m.

The exterminator will be inspecting areas around the furniture, beds, mattresses, heating pipes, outlets and any wall voids or pipe chases. *If you will not be at home please leave a note indicating if there is any activity and wherein your apartment you have noticed activity.*

Any questions please contact the Housing Inspector, John Sullivan at 617-625-1152, extension 350.

You <u>must</u> clear items off tops of furniture and away from walls to access perimeter. Remove items in closets on floors. We can move larger items.

Bed Bug Extermination Preparation Checklist

In order to properly treat your apartment the following items may need to be completed prior to our arrival on your scheduled date.

- Remove **items on top** of dressers, head boards and night stands to allow inspection and proper treatment.
- Remove all clothing, linens, comforters, and cloth items from areas being treated, wash items in hot water, dry and store in **new** sealed plastic trash bags.
- Remove all children's toys from area place in plastic containers or bags.
- Remove all pets from area and place in a cage or in another room not being treated, including fish, hamsters, birds etc.
- Remove all small area rugs and wash and store in sealed clean plastic trash bags.
- After or during treatment mattresses will be covered. **Do not remove plastic coverings** and repair any tears or holes with duct tape.
- Remove bedding on the morning of treatment and place in plastic trash bags until they are washed in hot water. Dispose of used plastic bags into dumpster and place inside new bags after cleaning.
- After treatment launder bedding weekly.
- **Do not wash areas of floors** where treatment was conducted to ensure prolonged activeness.
- **Vacuum** any areas being treated or monitored including tucks and folds of cloth coverings, cracks and crevices, inside drawers, edges of floors. Dispose of vacuum bag after each use directly in the trash dumpster.
- **Do not remove infested items** from your apartment to prevent further infestation. All items need to be treated and wrapped in plastic and disposed of directly into the dumpster to prevent re-use. This includes cardboard boxes, beds, furniture, books and other cloth, paper or wood items.

Questions or concerns contact John Sullivan at the Somerville Housing Authority at 617-625-1152, extension 350.

Upon motion made by Comm. McDonald seconded by Comm. Cafarella it was voted to approve Item 9(a).

Consideration of request by the Executive Director to approve the Somerville Housing Authority's Agency Plan for Fiscal Year 2012. (Roll vote required).

Upon roll call the ayes and nays is as follows:

<u>Ayes</u>

<u>Nays</u>

Absent

Comm. McDonald

Comm. Racicot

Comm. Cafarella

Comm. McCallum

Chairman Bonney, Jr.

SO VOTED

PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ____ 5-Year and/or _X Annual PHA Plan for the PHA fiscal year beginning _2012_, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

- 1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
- 2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
- 3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
- 4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
- 5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
- 6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
- 7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
- 8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a
 pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
- 9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
- 10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
- 11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

- 12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
- 13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
- 14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
- 15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
- 16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
- 17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
- 18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
- 19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
- 20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
- 21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
- 22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Somerville Housing Authority PHA Name	MAO31 PHA Number/HA Code		
5-Year PHA Plan for Fiscal Years 20 20 Annual PHA Plan for Fiscal Years 2012 2013	<u>-</u>		
I hereby certify that all the information stated herein, as well as any information provid prosecute false claims and statements. Conviction may result in criminal and/or civil pe	ed in the accompaniment herewith, is true and accurate. Warning: HUD will malties. (18 U.S.C. 1001, 1010, 1012, 31 U.S.C. 3729, 3802)		
Name of Authorized Official	Title .		
RONALD BONNEY	CHAIRMAN		
Signature Sufficient S	Date 14 DCC 11		

Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Civil Rights Certification

Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

the Americans with Disabilities Act of	of 1990, and will at	tirmativel	y further fair housing.		
Somerville Housing Authority		MA031			
PHA Name		PHA Number/HA Code			
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· ·					
				H.T. '11	
I hereby certify that all the information stated herein, as prosecute false claims and statements. Conviction may				.UD will	
Name of Authorized Official	Ronald Bonney	Title	Chairman, SHA Board of Comm	issioners	
		4.0	44.4/0.04.4		
Signature On Signature		Date 12/	/14/2011		
· /					

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Applicant Name				
Somerville Housing Authority MA031				
Program/Activity Receiving Federal Grant Funding				
2012 Capital Fund				
	•			

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any int	formation provided in the accompaniment herewith, is true and accurate.		
Warning: HUD will prosecute false claims and statements. Conviction ma (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	y result in criminal and/or civil penalties.		
Name of Authorized Official	Title		
Joseph Macaluso	Executive Director		
Signature M Maculuse	Date (mm/dd/yyyy) 12/14/2011		

Previous edition is obsolete

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.)

1. Type of Federal Action:	2. Status of Federa	I Action:	3. Report Type:		
B a. contract	a. bid/o	ffer/application	a. initial filing		
b. grant	b. initial award		b. material change		
c. cooperative agreement	c. post-	award	For Material (Change Only:	
d. loan	·		year quarter		
e. Ioan guarantee	date of last report		st report		
f. loan insurance					
4. Name and Address of Reportin	g Entity:	5. If Reporting Er	ntity in No. 4 is a Si	ubawardee, Enter Name	
➤ Prime	e and Address of Prime:			•	
	_, if known: Somerville Housing Authority				
		30 Memorial Roa	d		
		Somerville MA 02	2145		
Congressional District, if known	1: ^{4c}	Congressional	District, if known:	•	
6. Federal Department/Agency:		7. Federal Progra	m Name/Description	on:	
		2012 Capital Fun	ıd		
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	CFDA Number, if applicable:				
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8. Federal Action Number, if know	own: 9. Award Amount, if known:				
		\$ \$731,000		•	
10. a. Name and Address of Lobb	ving Registrant	b. Individuals Pe	rforming Services	(including address if	
(if individual, last name, first r		different from N	_		
(ii iii airi aaai, iaar nama, mari		(last name, first name, MI):			
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11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who falls to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.		Signature:	Marilu.	<i>∪</i>	
		Print Name: Jose	nh Macaluso		
		Print Name:	pm 1/14041430		
		Title: Executive Di	rector		
		Telephone No.: 6	17-625-1152	Date: 12/16/11	
				Authorized for Local Reproduction	
Federal Use Only:				Standard Form III (Rev. 7-97)	

SOMERVILLE HOUSING AUTHORITY VIOLENCE AGAINST WOMEN ACT POLICY

I. Purpose and Applicability

The purpose of this policy (herein called "Policy") is to implement the applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) (VAWA) and more generally to set forth Somerville Housing Authority's (SHA) policies and procedures regarding domestic violence, dating violence, and stalking, as hereinafter defined.

This Policy shall be applicable to the administration by SHA of all federally subsidized public housing and Section 8 rental assistance under the United States Housing Act of 1937 (42 U.S.C. §1437 *et seq.*). Notwithstanding its title, this policy is gender-neutral, and its protections are available to males who are victims of domestic violence, dating violence, or stalking as well as female victims of such violence.

II. Goals and Objectives

This Policy has the following principal goals and objectives:

- A. Maintaining compliance with all applicable legal requirements imposed by VAWA;
- B. Ensuring the physical safety of victims of actual or threatened domestic violence, dating violence, or stalking who are assisted by SHA;
- C. Providing and maintaining housing opportunities for victims of domestic violence dating violence, or stalking;
- D. Creating and maintaining collaborative arrangements between SHA, law enforcement authorities, victim service providers, and others to promote the safety and well-being of victims of actual and threatened domestic violence, dating violence and stalking, who are assisted by SHA; and
- E. Taking appropriate action in response to an incident or incidents of domestic violence, dating violence, or stalking, affecting individuals assisted by SHA.

III. Other SHA Policies and Procedures

This Policy shall be referenced in and attached to SHA's Five-Year Public Housing Agency Plan and shall be incorporated in and made a part of SHA's Admissions and Continued Occupancy Policy and SHA's Section 8 Administrative Plan. SHA's annual public housing agency plan shall also contain information concerning SHA's activities, services or programs relating to domestic violence, dating violence, and stalking.

To the extent any provision of this policy shall vary or contradict any previously adopted policy or procedure of SHA, the provisions of this Policy shall prevail.

IV. Definitions

As used in this Policy:

- A. Domestic Violence The term 'domestic violence' includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabiting with or has cohabited with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction."
- B. Dating Violence means violence committed by a person—
 - (A) who is or has been in a social relationship of a romantic or intimate nature with the victim; and
 - (B) where the existence of such a relationship shall be determined based on a consideration of the following factors:
 - (i) The length of the relationship.
 - (ii) The type of relationship.
 - (iii) The frequency of interaction between the persons involved in the relationship.

C. Stalking – means –

- (A) (i) to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person; and (ii) to place under surveillance with the intent to kill, injure, harass or intimidate another person; and
- (B) in the course of, or as a result of, such following, pursuit, surveillance or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to
 - (i) that person;
 - (ii) a member of the immediate family of that person; or
 - (iii) the spouse or intimate partner of that person;
- D. Immediate Family Member means, with respect to a person -
 - (A) a spouse, parent, brother, sister, or child of that person, or an individual to whom that person stands in loco parentis; or
 - (B) any other person living in the household of that person and related to that person by blood or marriage.
- E. *Perpetrator* means person who commits an act of domestic violence, dating violence or stalking against a victim.

V. Admissions and Screening

Non-Denial of Assistance. SHA will not deny admission to public housing or to the Section 8 rental assistance program to any person because that person is or has been a victim of domestic violence, dating violence, or stalking, provided that such person is otherwise qualified for such admission.

Where the SHA receives adverse information about an applicant/household member and is aware that domestic violence might be involved, the SHA shall determine whether there is a substantial connection between the adverse information and the fact that the applicant/household member is a victim of domestic violence. If the SHA determines that there is such a connection, then the SHA shall disregard the adverse information (provided that the perpetrator will not be part of the applicant's household).

A substantial connection includes, but is not limited to, where a victim loses financial support (e.g. victim's job or perpetrator's wages) due to domestic violence and is evicted (or receives a negative landlord reference) for late or nonpayment of rent; where a victim is evicted or receives a negative landlord reference due to property damage and/or noise or other interference with neighbors caused by the perpetrator; and where a victim receives a negative landlord reference for breaking a lease prior to its expiration due to domestic violence.

VI. Termination of Tenancy or Assistance

- A. *VAWA Protections*. Under VAWA, public housing residents and persons assisted under the Section 8 rental assistance program have the following specific protections, which will be observed by SHA:
 - 1. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be considered to be a "serious or repeated" violation of the lease by the victim or threatened victim of that violence and will not be good cause for terminating the tenancy or occupancy rights of or assistance to the victim of that violence.
 - 2. In addition to the foregoing, tenancy or assistance will not be terminated by SHA as a result of criminal activity, if that criminal activity is directly related to domestic violence, dating violence or stalking engaged in by a member of the assisted household, a guest or another person under the tenant's control, and the tenant or an immediate family member is the victim or threatened victim of this criminal activity. However, the protection against termination of tenancy or assistance described in this paragraph is subject to the following limitations:
 - (a) Nothing contained in this paragraph shall limit any otherwise available authority of SHA' or a Section 8 owner or manager to terminate tenancy, evict, or to terminate assistance, as the case may be, for any violation of a lease or program requirement not premised on the act or acts of domestic violence, dating violence, or stalking in question against the tenant or a member of the tenant's household. However, in taking any such action, neither SHA nor a Section 8 manager or owner may apply a more demanding standard to the victim of domestic violence dating violence or stalking than that applied to other tenants.

- (b) Nothing contained in this paragraph shall be construed to limit the authority of SHA or a Section 8 owner or manager to evict or terminate from assistance any tenant or lawful applicant if the owner, manager or SHA, as the case may be, can demonstrate an actual and imminent threat to other tenants or to those employed at or providing service to the property, if the tenant is not evicted or terminated from assistance.
- 3. Where property damage is caused by a perpetrator, the SHA shall not terminate the Section 8 subsidy or evict from public housing the victim of domestic violence, dating violence, or stalking because of such property damage.
- 4. Where nonpayment of rent or other charges due the SHA is caused by the perpetrator, and where the victim of domestic violence, dating violence or stalking removes said perpetrator from the lease, the SHA shall offer the remaining household members a reasonable repayment plan (without charging late fees but may recover costs) and shall not evict the remaining members for such nonpayment so long as they substantially comply with said plan.
- B. Removal of Perpetrator. Further, notwithstanding anything in paragraph VI.A.2. or Federal, State or local law to the contrary, SHA or a Section 8 owner or manager, as the case may be, may bifurcate a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to a lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in acts of physical violence against family members or others. Such action against the perpetrator of such physical violence may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also the tenant or a lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by law applicable to terminations of tenancy and evictions by SHA.

VII. Verification of Domestic Violence, Dating Violence or Stalking

A. Requirement for Verification. The law allows, but does not require, SHA or a section 8 owner or manager to verify that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking claimed by a tenant or other lawful occupant is bona fide and meets the requirements of the applicable definitions set forth in this policy. Subject only to waiver as provided in paragraph VII. C., SHA shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by SHA. Section 8 owners or managers receiving rental assistance administered by SHA may elect to require verification, or not to require it as permitted under applicable law.

Verification of a claimed incident or incidents of actual or threatened domestic violence, dating violence or stalking may be accomplished in one of the following three ways:

1. HUD-approved form - by providing to SHA or to the requesting Section 8 owner or manager a written certification, on a form approved by the U.S. Department of Housing and Urban Development (HUD), that the individual is a victim of domestic violence,

dating violence or stalking that the incident or incidents in question are bona fide incidents of actual or threatened abuse meeting the requirements of the applicable definition(s) set forth in this policy. The incident or incidents in question must be described in reasonable detail as required in the HUD-approved form, and the completed certification must include the name of the perpetrator.

- 2. Other documentation by providing to SHA or to the requesting Section 8 owner or manager documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional, from whom the victim has sought assistance in addressing the domestic violence, dating violence or stalking, or the effects of the abuse, described in such documentation. The professional providing the documentation must sign and attest under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse meeting the requirements of the applicable definition(s) set forth in this policy. The victim of the incident or incidents of domestic violence, dating violence or stalking described in the documentation must also sign and attest to the documentation under penalty of perjury.
- 3. *Police or court record* by providing to SHA or to the requesting Section 8 owner or manager a Federal, State, tribal, territorial, or local police or court record describing the incident or incidents in question.
- B. Time allowed to provide verification/ failure to provide. An individual who claims protection against adverse action based on an incident or incidents of actual or threatened domestic violence, dating violence or stalking, and who is requested by SHA, or a Section 8 owner or manager to provide verification, must provide such verification within 14 business days (i.e., 14 calendar days, excluding Saturdays, Sundays, and federally-recognized holidays) after receipt of the request for verification. Failure to provide verification, in proper form within such time will result in loss of protection under VAWA and this policy against a proposed adverse action. Extensions may be granted for good cause.
- C. Waiver of verification requirement. The Executive Director of SHA, or a Section 8 owner or manager, may, with respect to any specific case, waive the above-stated requirements for verification and provide the benefits of this policy based on the victim's statement or other corroborating evidence. Such waiver may be granted in the sole discretion of the Executive Director, owner or manager. Any such waiver must be in writing. Waiver in a particular instance or instances shall not operate as precedent for, or create any right to, waiver in any other case or cases, regardless of similarity in circumstances.

VIII. Confidentiality

- A. Right of confidentiality. All information (including the fact that an individual is a victim of domestic violence, dating violence or stalking) provided to SHA or to a Section 8 owner or manager in connection with a verification required under section VII of this policy or provided in lieu of such verification where a waiver of verification is granted, shall be retained by the receiving party in confidence and shall neither be entered in any shared database nor provided to any related entity, except where disclosure is:
 - 1. requested or consented to by the individual in writing, or

- 2. required for use in a public housing eviction proceeding or in connection with termination of Section 8 assistance, as permitted in VAWA, or
- 3. otherwise required by applicable law.
- B. Notification of rights. All tenants of public housing and tenants participating in the Section 8 rental assistance program administered by SHA shall be notified in writing concerning their right to confidentiality and the limits on such rights to confidentiality.

IX. Transfer to New Residence

- A. Application for transfer. In situations that involve significant risk of violent harm to an individual as a result of previous incidents or threats of domestic violence, dating violence, or stalking, SHA will, if an approved unit size is available at a location that may reduce the risk of harm, approve transfer by a public housing or Section 8 tenant to a different unit in order to reduce the level of risk to the individual. A tenant who requests transfer must attest in such application that the requested transfer is necessary to protect the health or safety of the tenant or another member of the household who is or was the victim of domestic violence, dating violence, or stalking and who reasonably believes that the tenant or other household member will be imminently threatened by harm from further violence if the individual remains in the present dwelling unit. Where appropriate, transfers may be granted from federal public housing to Section 8 and from Section 8 to federal public housing.
 - B. No right to transfer. SHA will make every effort to accommodate requests for transfer when suitable alternative vacant units are available and the circumstances warrant such action. However, except with respect to portability of Section 8 assistance as provided in paragraph IX. D below the decision to grant or refuse to grant a transfer shall lie within the sole discretion of SHA, and this policy does not create any right on the part of any applicant to be granted a transfer.
 - C. Family rent obligations. If the family occupying SHA public housing moves in order to protect the health or safety of a household member, the family's obligation to provide 30 days advance notice of its move shall be waived by the SHA.
 - D. Portability. Notwithstanding the foregoing, a Section 8-assisted tenant will not be denied portability to a unit located in another jurisdiction (notwithstanding the term of the tenant's existing lease has not expired, the tenant has not provided the required notice of vacating to the SHA or the family has not occupied the unit for 12 months) so long as the tenant has complied with all other requirements of the Section 8 program and has moved from the unit in order to protect a health or safety of an individual member of the household who is or has been the victim of domestic violence dating violence or stalking and who reasonably believes that the tenant or other household member will be imminently threatened by harm from further violence if the individual remains in the present dwelling unit.

X. Relationships with Service Providers

It is the policy of SHA to cooperate with organizations and entities, both private and governmental that provides shelter and/or services to victims of domestic violence. If SHA staff become aware that an individual assisted by SHA is a victim of domestic violence, dating violence or stalking, SHA will refer the victim to such providers of shelter or services as appropriate. Notwithstanding the foregoing, this Policy does not create any legal obligation requiring SHA either to maintain a relationship with any particular provider of shelter or services to victims or domestic violence or to make a referral in any particular case. SHA's annual public housing agency plan shall describe providers of shelter or services to victims of domestic violence with which SHA has referral or other cooperative relationships.

XI. Notification

SHA shall provide written notification to applicants, tenants, and Section 8 owners and managers, concerning the rights and obligations created under VAWA relating to confidentiality, denial of assistance and, termination of tenancy or assistance.

XII. Relationship with Other Applicable Laws

Neither VAWA nor this Policy implementing it shall preempt or supersede any provision of Federal, State or local law that provides greater protection than that provided under VAWA for victims of domestic violence, dating violence or stalking.

XIII. Amendment

This policy may be amended from time to time by SHA as approved by the SHA Board of Commissioners after consultation with the Resident Advisory Board.

Drafted: 6.12.07